



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

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Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td style="width: 33%;">           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </td> <td style="width: 33%;">           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </td> <td style="width: 33%;">           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </td> <td style="width: 33%;">           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </td> </tr> </table>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>			

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

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Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
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<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
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		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

## Page 3

February-14-13 1:21:19 PM

**Reference:**

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

## Quality Control

MLJ 1303-22

mf  
13-3-22

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-around;"> <div style="text-align: right;">             Rework <input type="checkbox"/>              Scrap <input type="checkbox"/>              Use-as-is <input type="checkbox"/>              Work Order Update <input type="checkbox"/> </div> <div style="text-align: right;">             Skid-tube <input type="checkbox"/>              Machining <input type="checkbox"/>              Thermoforming <input type="checkbox"/>              Large Fab <input type="checkbox"/> </div> <div style="text-align: right;">             Crosstube <input type="checkbox"/>              Small Fab <input type="checkbox"/>              Finishing <input type="checkbox"/>              Composite <input type="checkbox"/> </div> <div style="text-align: right;">             Water Jet <input type="checkbox"/>              Prod. Eng. Coord. <input type="checkbox"/>              Rec/Store/Packaging <input type="checkbox"/>              Supplier <input type="checkbox"/> </div> <div style="text-align: right;">             Engineering <input type="checkbox"/>              Quality <input type="checkbox"/>              Other <input type="checkbox"/> </div> </div>		<b>AGAINST DEPARTMENT/PROCESS</b>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	

# Picklist Print

February-14-13 10:48:14 AM

Page 1

Work Order ID: 97044

Parent Item: D2891-1

Parent Item Name: 2.25 Support

Start Date: 2/14/13

Required Date: 3/06/13

Start Qty: 16.00

Required Qty: 16.00

Comments: IPP C02.11.26Added P/OKJ  
IPP D 08.03.19 Re-format EC verified: DD IPP Rev:E 11.08.04 as per dwg  
rev.B DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
DSK076		Manufactured	No			110	Each	14.0000	0.5	8			
D2891-1 TURNING DETAIL													

Location	Loc Qty	Loc Code
MAT050	10	
96488	10	
MAT060	4	
89471	4	
96428	4	

4  
4

JFC 2013-03-15

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  <div style="display: flex; justify-content: space-around;"> <div>Rework <input type="checkbox"/></div> <div>Skid-tube <input type="checkbox"/></div> <div>Crosstube <input type="checkbox"/></div> <div>Water Jet <input type="checkbox"/></div> <div>Engineering <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Scrap <input type="checkbox"/></div> <div>Machining <input type="checkbox"/></div> <div>Small Fab <input type="checkbox"/></div> <div>Prod. Eng. Coord. <input type="checkbox"/></div> <div>Quality <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Use-as-is <input type="checkbox"/></div> <div>Thermoforming <input type="checkbox"/></div> <div>Finishing <input type="checkbox"/></div> <div>Rec/Store/Packaging <input type="checkbox"/></div> <div>Other <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Work Order Update <input type="checkbox"/></div> <div>Large Fab <input type="checkbox"/></div> <div>Composite <input type="checkbox"/></div> <div>Supplier <input type="checkbox"/></div> </div>	
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		



<b>DART AEROSPACE LTD</b>		<b>Work Order:</b>	97044
<b>Description: Ø2.250 Support</b>		<b>Part Number:</b>	D2891-1
<b>Inspection Dwg: D2891</b>	<b>Rev: B</b>	<b>Page 1 of 1</b>	

### FIRST ARTICLE INSPECTION DIMENSION SHEET

				Record Actual Dimensions				
Dim	Min	Max	Go/No Go Gauge	1	2	3	4	5
HAAS Section								
AA	0.188	0.193		.188	.188	.188	.188	.188
AB	0.240	0.260		.250	.250	.250	.250	.250
AC	0.115	0.150		.130	.130	.130	.130	.130
AD	0.040	0.060		.050	.050	.050	.050	.050
AE	0.010	0.020		.010	.010	.010	.010	.010
AF	0.240	0.260		.250	.250	.250	.250	.250
AG	0.290	0.310		.300	.300	.300	.300	.300
AH	0.115	0.150		.140	.140	.140	.140	.140
AI	0.454	0.474		.466	.466	.467	.467	.467
AJ	2.779	2.789		2.782	2.782	2.781	2.781	2.781
AK	0.240	0.260		.250	.250	.250	.250	.250
AL	1.002	1.042		1.041	1.041	1.040	1.039	1.040
AM	0.053	0.073		.063	.063	.063	.063	.063
AN	0.257	0.262		.258	.258	.258	.258	.258
AO	1.663	1.683		1.677	1.677	1.678	1.678	1.678
AP	0.053	0.073		.063	.063	.063	.063	.063
AQ	0.022	0.042		.032	.032	.032	.032	.032
AR								
AS								
AT								
Accept/Reject								

<b>Measured by:</b>	BL	<b>Date:</b>	13.03.19
<b>Audited by:</b>	FK	<b>Date:</b>	13/03/21
<b>Preliminary Approval:</b>		<b>Date:</b>	

Rev	Date	Change	Revised by	Approved
A	02.12.12	New Issue	KJ/RF	
B	08.04.21	Reformat	KJ/JLM	
C	12.09.26	Dwg Rev updated	KJ	

DART AEROSPACE LTD		Work Order: 97044
Description: Ø2.250 Support		Part Number: D2891-1
Inspection Dwg: D2891	Rev: B	Page 1 of 1

### FIRST ARTICLE INSPECTION DIMENSION SHEET

				Record Actual Dimensions				
Dim	Min	Max	Go/No Go Gauge	1 6	2 7	3 8	4 9	5 10
HAAS Section								
AA	0.188	0.193		.188	.188	.188	.188	.188
AB	0.240	0.260		.250	.250	.250	.250	.250
AC	0.115	0.150		.130	.130	.130	.130	.130
AD	0.040	0.060		.050	.050	.050	.050	.050
AE	0.010	0.020		.010	.010	.010	.010	.010
AF	0.240	0.260		.250	.250	.250	.250	.250
AG	0.290	0.310		.300	.300	.300	.300	.300
AH	0.115	0.150		.140	.140	.140	.140	.140
AI	0.454	0.474		.467	.467	.467	.467	.467
AJ	2.779	2.789		2.784	2.784	2.784	2.784	2.784
AK	0.240	0.260		.250	.250	.250	.250	.250
AL	1.002	1.042		1.039	1.040	1.041	1.040	1.041
AM	0.053	0.073		.063	.063	.063	.063	.063
AN	0.257	0.262		.258	.258	.258	.258	.258
AO	1.663	1.683		1.678	1.678	1.678	1.678	1.678
AP	0.053	0.073		.063	.063	.063	.063	.063
AQ	0.022	0.042		.033	.033	.033	.033	.033
AR								
AS								
AT								
Accept/Reject								

Measured by: BC	Date: 13.03.19
Audited by: <del>BC</del> FK	Date: 13/03/21
Preliminary Approval:	Date:

Rev	Date	Change	Revised by	Approved
A	02.12.12	New Issue	KJ/RF	
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<b>DART AEROSPACE LTD</b>		<b>Work Order:</b>	97044
<b>Description: Ø2.250 Support</b>		<b>Part Number:</b>	D2891-1
<b>Inspection Dwg: D2891</b>	<b>Rev: B</b>	<b>Page 1 of 1</b>	

### FIRST ARTICLE INSPECTION DIMENSION SHEET

				Record Actual Dimensions				
Dim	Min	Max	Go/No Go Gauge	11	12	13	14	15
HAAS Section								
AA	0.188	0.193		.188	.188	.188	.188	.188
AB	0.240	0.260		.250	.250	.250	.250	.250
AC	0.115	0.150		.130	.130	.130	.130	.130
AD	0.040	0.060		.050	.050	.050	.050	.050
AE	0.010	0.020		.010	.010	.010	.010	.010
AF	0.240	0.260		.250	.250	.250	.250	.250
AG	0.290	0.310		.300	.300	.300	.300	.300
AH	0.115	0.150		.140	.140	.140	.140	.140
AI	0.454	0.474		.466	.464	.467	.467	.467
AJ	2.779	2.789		2.784	2.784	2.784	2.784	2.784
AK	0.240	0.260		.250	.250	.250	.250	.250
AL	1.002	1.042		1.041	1.041	1.041	1.040	1.040
AM	0.053	0.073		.063	.063	.063	.063	.063
AN	0.257	0.262		.258	.258	.258	.258	.258
AO	1.663	1.683		1.678	1.678	1.678	1.678	1.678
AP	0.053	0.073		.063	.063	.063	.063	.063
AQ	0.022	0.042		.032	.032	.032	.032	.032
AR								
AS								
AT								
Accept/Reject								

<b>Measured by:</b>	BL	<b>Date:</b>	13.07.20
<b>Audited by:</b>	F.K	<b>Date:</b>	13/03/21
<b>Preliminary Approval:</b>		<b>Date:</b>	

Rev	Date	Change	Revised by	Approved
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DART AEROSPACE LTD		Work Order:	97044
Description: Ø2.250 Support		Part Number:	D2891-1
Inspection Dwg: D2891	Rev: B	Page 1 of 1	

### FIRST ARTICLE INSPECTION DIMENSION SHEET

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AC	0.115	0.150		.130				
AD	0.040	0.060		.050				
AE	0.010	0.020		.010				
AF	0.240	0.260		.250				
AG	0.290	0.310		.300				
AH	0.115	0.150		.140				
AI	0.454	0.474		.466				
AJ	2.779	2.789		2.784				
AK	0.240	0.260		.250				
AL	1.002	1.042		1.024				
AM	0.053	0.073		.063				
AN	0.257	0.262		.258				
AO	1.663	1.683		1.679				
AP	0.053	0.073		.063				
AQ	0.022	0.042		.032				
AR								
AS								
AT								
Accept/Reject								

Measured by: BF	Date: 13-03-20
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Audited by: FK	Date: 13/03/21
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Preliminary Approval:	Date:
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Rev	Date	Change	Revised by	Approved
A	02.12.12	New Issue	KJ/RF	
B	08.04.21	Reformat	KJ/JLM	
C	12.09.26	Dwg Rev updated	KJ	

**NOTES:**

1) MATERIAL: 17-4 PH STAINLESS STEEL, H900 OR H925 CONDITION  
MIN UTS = 170 KSI (38 HRC)  
(REF DART SPEC. D6104)

2) FINISH: NONE

3) TOLERANCES: PER DART QSI 018 (REF X.XXX = ±0.010) UNLESS OTHERWISE NOTED

4) UNITS: INCHES UNLESS OTHERWISE NOTED

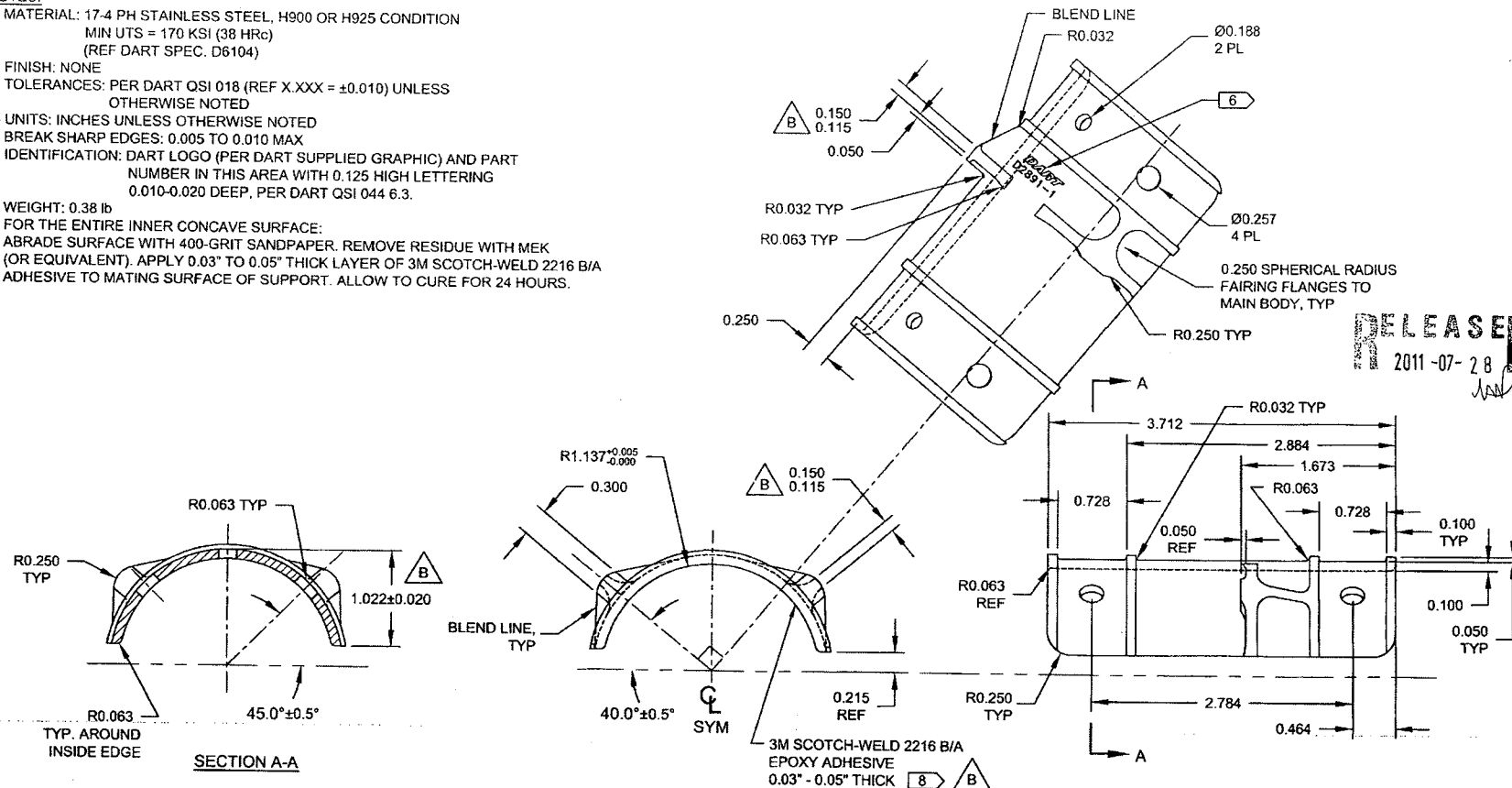
5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX

6) IDENTIFICATION: DART LOGO (PER DART SUPPLIED GRAPHIC) AND PART NUMBER IN THIS AREA WITH 0.125 HIGH LETTERING  
0.010-0.020 DEEP, PER DART QSI 044 6.3.

7) WEIGHT: 0.38 lb

8) FOR THE ENTIRE INNER CONCAVE SURFACE:

ABRADE SURFACE WITH 400-GRIT SANDPAPER. REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY 0.03" TO 0.05" THICK LAYER OF 3M SCOTCH-WELD 2216 B/A (ADHESIVE TO MATING SURFACE OF SUPPORT. ALLOW TO CURE FOR 24 HOURS.



**D2891-1 SUPPORT**

B	RMV FINISH, ADD 3M 2216, ADD H925 MAT'L OPTION, UPDATE TOLERANCE (ZN D4-1,B4-1,B6-1)	CP	11.07.15
A	NEW ISSUE	CP	00.11.17
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	11.07.15		

**DART AEROSPACE LTD**  
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. REV. B  
D2891 SHEET 1 OF 1  
TITLE SCALE  
Ø2.250 SUPPORT NTS

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